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Room: Ballroom

Anaphylactic reaction to Praziquantel treatment: First case report from Yemen

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Background: Praziquantel (PZQ) has been used comprehensively in Yemen during recent years where more than nine million Yemenis were treated during the May 2013 national campaign against schistosomiasis. PZQ is safe for global use despite some known mild transient adverse effects. However, severe reactions have been rarely recognized. Although PZQ has been globally used for more than a billion people during last 30 years, at present less than 10 cases of hypersensitive reactions have been reported worldwide. Here we report the first case of severe anaphylactic reaction from PZQ from Yemen

Methods & Materials: Case report

Results: A 21-year-old Yemeni previously healthy man was administered PZQ during the last national campaign against schistosomiasis. Thirty minutes later he experienced a sudden onset of itching urticaria over his entire body with facial swelling, dizziness, and syncope. The patient had no recent medication history except for the PZQ and had no specific medical history. He was brought in shock to the emergency department of Ibin Khldoon hospital in Lahj where he diagnosed as having severe anaphylactic reaction with skin eruptions induced by PZQ. His symptoms subsided two days later after intensive anti-anaphylactic treatment

Conclusion: PZQ is a safe anti-helminthic but hypersensitive reaction may rarely occur and could be serious. In countries like Yemen, where there is huge mass treatment especially during national campaigns against schistosomiasis such rare reactions could be encountered more frequently. Therefore, doctors and field workers during such campaigns should be aware of these reactions and well prepared to take action.

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Malaria case management: Enabling appropriate use of ACTsE.N. Wesangula^{1,*}, D. Memusi², J. Mbului³, R. Kolute¹¹ Kenya Medical Training College, Nairobi, Kenya² Ministry of Health, Nairobi, Kenya³ Mission for Essential Drugs Supplies, Nairobi, Kenya

Background: Several determinants such as unaffordable prices have limited access to quality assured medicines in most malaria endemic countries. The Affordable Medicines Facility- malaria (AmFm), by the Global Fund against Tuberculosis, AIDS and Malaria (GFTAM) aimed at expanding access to the most effective treatment for malaria, Artemisinin based combinations (ACTs), to save lives and reduce the presence and use of less effective treatment options.

Access is not only measured by the availability of the medicines at the point of use, but the promptness and effectiveness of treatment offered. Improved availability of medicines needs to be matched with the ability of service providers to handle and appropriately diagnose, prescribe and dispense the correct treatment at the point of care.

In 2012 the Division of Malaria control introduced the test before you treat policy. Rapid Diagnostic Test Kits (RDTs) were introduced in the public sector. Capacity building of public sector health workers was done before private sector health workers were exposed to structured training by the division of malaria control.

Methods & Materials: Two sets of cross-sectional data were collected on a population of 500 private sector health workers from Nairobi. Pre-test studies done were analyzed for 141 randomly sampled participants to determine their levels of knowledge, attitudes and practices prior to training.

Results: 85% of the HW had never attended any malaria case management training. 40% knew the correct frequency of administration of AL, 56% did not know the correct loading dose for quinine and 55% were aware of the second line of treatment. In diagnosis of malaria 55% could correctly report microscopy laboratory results while 59% had incorrect perceptions on the utility of RDTs immediately after treatment with AL. 51% did not know how to manage fever in under fives in accordance with the current guidelines.

Conclusion: Training private sector health workers is an essential milestone towards achieving increased access to malaria medicines and appropriate malaria case management. Provision of low cost rapid diagnostic test kits and further capacity building of private sector health workers in providing prompt point of care diagnosis and treatment is required.

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